



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
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38846

7590

03/22/2004

CARLSON, CASPERS, VANDENBURGH & LINDQUIST
225 SO. 6TH STREET
SUITE 3200
MPIS, MN 55402

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Iain A. McIntyre

(Depositor's name)

[Signature]

(Signature)

05/27/2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/050,329	01/15/2002	Jan-Olof Westrom	980.1127US01	6222

TITLE OF INVENTION: GRATING ASSISTED COUPLER WITH CONTROLLED START

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/22/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LAUCHMAN, LAYLA G	2877	385-037000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Carlson, Caspers,
Vandenburg & Lindquist
2
3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

ADC Telecommunications, Inc.

13625 Technology Drive
Eden Prairie, MN 55344Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2886 (enclose an extra copy of this form).

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(Authorized Signature) Iain A. McIntyre (Date) 05/27/2004Iain A. McIntyre Reg. No. 40,337 05/27/2004

06/03/2004 HALI22 00000068 10050329

01 FC:1501

1330.00 OP

02 FC:1504

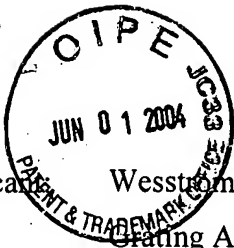
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TRANSMIT THIS FORM WITH FEE(S)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Weston et al.

Title: Grating Assisted Coupler with Controlled Start

Docket No.: 1010.8127U1

Filed: January 15, 2002

Examiner: Lauchman, L. G.

Serial No.: 10/050329

Due Date: June 22, 2004

Group Art Unit: 2877

Commissioner for Patents

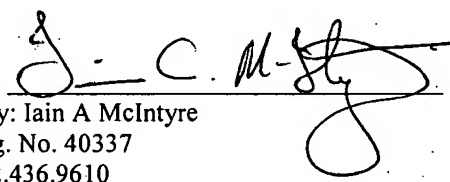
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We are transmitting herewith the following attached items (as indicated with an "X"):

- ☒ A return postcard.
- ☒ Issue Fee Transmittal (1 pg.).
- ☒ A Check in the Amount of \$1,630.00 for Issue and Publication Fees.

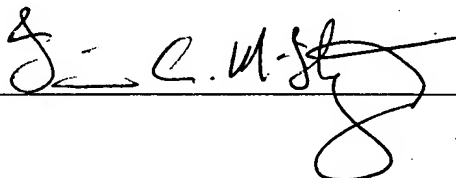
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By: 
Atty: Iain A McIntyre
Reg. No. 40337
612.436.9610

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Iain A. McIntyre

Name


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